PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application r Docket Number

YPB288 PC

CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL ENTITY TYPE			OR SMALL ENTITY		
21.4116			(Column 1)		100idimiz/		8						
TOTAL CLAIMS					-			RATE	FEE		RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=					X\$ 9=		OR	X\$18=		
INE	EPENDENT CL	AIMS	minus 3 =		•			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	÷	
° If the difference in column 1 is less than zero, ente						olumn 2	<u>e</u>	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART						(Calumn 2)		SMALLE	ENTITY	OR	OTHER SMALL E		
	(Column 1) (Column 2) (Column 3)							7				ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	. 28	Minus	2	8)		X\$ 9=		OR	X\$18=		
	Independent	. 10	Minus	••• (<u> </u>	=		X40=		OΡ	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	<i></i>	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
(October 9)													
		(Column 1) CLAIMS	7 *. * * * * * * * * * * * * * * * * * *		IEST .	(Oolumino)) r		ADDN		r	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE_	
	Total	. 90	Minus	.28		=		X\$ 9=		OR	X\$18=		
	Independent	. 8	Minus	000	6	=		X40=		OR	X80=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
								+135=		OR	+270=\ TOTAL		
,								TOTAL ADDIT, FEE		OR	ADDIT. FEE	L	
	_	(Column 1)			mn 2)	(Column 3)	<u>)</u>	•					
		CLAIMS			HEST MBER	_PRESENT_			ADDI-			ADDI-	
AMENDIAENT C	,	REMAINING AFTER AMENDMENT		PREVI	OUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE_	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***]=	1	X40=		OR	X80=		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		оя	+270=		
the enter in column 1 is less than the entry in column 2, write "0" in column 3.											}		
	N the Stichast No	mber Previously P	ald For IN THI	S SPACE	is less tha	an 20, enter 720	p. *	ADDIT. FEE	L	OR	ADDIT. FEE		
00	ili tre filigheat Ni ask teerigilf eaff	imber Previously P riber Previously Pa	aid For (Total o	s SPACE r Indepen	es less the dent) is the	en 3, enter 3." e highest numb	oer fou	und in the ap	propriate bo	x in co	olumn 1.		